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05/19/2005

ST. ONGE STEWARD JOHNSTON & REENS, LLC
986 BEDFORD STREET
STAMFORD, CT 06905-5619

07/05/2005 HDENESS2-00000048-10659955

01 FC:1501

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Beatrice R. Emerson (Depositor's name)
Beatrice R. Emerson (Signature)
July 1, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/659,955	09/11/2003	Uwe Bacher	02581-P0543A	5868

TITLE OF INVENTION: MEDICAL INSTRUMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	08/19/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROLLINS, ROSILAND STACIE	3739	606-001000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

St. Onge Steward Johnston & Reens LLC

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Karl Storz GmbH & Co. KG

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Germany

07/05/2005 HDENESS2 00000049 10659955

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

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- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-4516 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Wesley W. Whitmyer, Jr.

Date

July 1, 2005

Typed or printed name

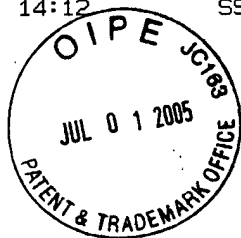
Wesley W. Whitmyer, Jr.

Registration No.

33,558

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July 1, 2005

SSJR File: 02581-P0543A
Pages 3

Deliver To: **ISSUE FEE**
Commissioner for Patents
Post Office Box 1450
Alexandria, VA 22313-1450

Fax No: 703 746-4000

From: Beatrice R. Emerson for
Wesley W. Whitmyer, Jr.

Re: Serial No. 10/659,955
Medical Instrument

Dear Sir or Madam:

Attached is the Issue Fee Transmittal, Part B – Fee(s) Transmittal, and Form PTO-2038
(credit card payment).

Sincerely,

Beatrice R. Emerson
bea@ssjr.com

WWW:be
Enclosures